

Sent By: MAUREEN STRETCH;

14:11 FAX 703 308 5065

USPTO-PUBS-CUST. SERV.

508 651 9932 ;

Nov-12-04 5:58PM;

@003

Page 16/20

PART B - FEE(S) TRANSMITTAL

BEST AVAILABLE COPY

or Fax

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

01/24/2004

Maureen Stretch
26 Charles Street
Natick, MA 01760

12/01/2004 RHEBRAH 00000017 501696 09702050

11 FC:1501 1370.00 DA
12 FC:8001 30.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

MAUREEN STRETCH (Depositor's name)
Maureen Stretch, Reg. #29,447 (Signature)
10/25/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/702,458	10/30/2000	JEFFREY CONKLIN	ET00-005CIP	8348

TITLE OF INVENTION: SYSTEM AND METHOD FOR CONTRACT AUTHORITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE (MM)
nonprovisional	NO	\$1330	\$0	\$1330	10/25/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MBNECKE DIAZ, SUSANNA M	3623	705-080000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

MAUREEN STRETCH

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Sky Technologies, LLC

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Boston, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted) (
- ☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 621 636 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature)

(Date)

Maureen Stretch R#29,447 10/25/04

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 07/04) Approved for use through 04/30/2007.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Sent By: MAUREEN STRETCH;

508 651 9832 ;

Nov-12-04 5:58PM

Page 18/20

PART B - FEE(S) TRANSMITTAL

BEST AVAILABLE COPY

Send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(703) 746-4000

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 3 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee correspondence.

CURRENT CORRESPONDENCE ADDRESS (Please Use Block 1 for any change of address)

7390

01/24/2004

Maureen Stretch
26 Charles Street
Natick, MA 01760

1/01/2004 RHEBRAH1 00000017 501696 09702050

FC:1501 1370.00 DA
FC:8001 30.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying paper. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

MAUREEN STRETCH (Depositor's name)
Maureen Stretch, Reg. #29,447 (Signature)
10/25/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09702050	10/30/2000	SEPP ZAY ROBINLIN	BT00-005CIP	8348

TITLE OF INVENTION: SYSTEM AND METHOD FOR CONTRACT AUTHORITY

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE
nonprovisional	NO	\$1330	\$0	\$1330	10/25/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MERINCKB DIAZ, SUSANNA M	3633	705-030000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.361).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB122) attached.

☐ "Fee Address" Indication (or "Fee Address" Indication form PTO/SB122; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

MAUREEN STRETCH

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as to form in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Sky Technologies, LLC

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

BOSTON, MA

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ individual ☒ corporation or other private group entity ☐ partnership

4a. The following fee(s) are enclosed:

☐ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - 8 of Copies 10

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2018 is enclosed.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 101136 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(c)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature)

(Date)

Maureen Stretch, Reg. #29,447 10/25/04

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to be paid by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 13 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

PTOL-45 (Rev. 11/04) Approval for use through 04/30/2007.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PAGE 3/13 * RCVD AT 11/30/2004 2:11:43 PM [Eastern Standard Time] * SVR:USPTO-EPXRF-27 * DNB:7484000 * CSID:703 308 5085 * DURATION (mm:ss):08:38

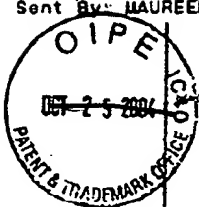
Adjustment date: 12/08/2004 GWORDF2
12/01/2004 RHEBRAH1 00000017 501696 09702050

01 FC:1501 1370.00 CR
02 FC:8001 30.00 CR

12/08/2004 GWORDF2 00000051 501696 09702050

01 FC:1501 1370.00 DA
02 FC:8001 30.00 DA

BEST AVAILABLE COPY



BEST AVAILABLE COPY

MAUREEN STRETCH**ATTORNEY AT LAW**

26 Charles Street

Natick, MA 01760

508-653-8143 • Fax: 508-651-9932

e-mail: mstretch@sprintmail.com

FAX COVER SHEET**To: Director of Patents and Trademarks, Mail Stop ISSUE FEE****Of: Commissioner for Patents, P.O. Box 1450 Alexandria VA 22313-1450****FAX NUMBER TRANSMITTED TO: 703-746-4000****From: Maureen Stretch,****Client/Matter: ET00-005CIP Issue Fee Transmittal App Ser. No. 09/702,050****Date: October 25, 2004****DOCUMENTS:****NUMBER OF PAGES**

(not counting this cover sheet)

1.	Part B - Fee(s) Transmittal Issue Fee for App 09/702,050	2
2.		
3.		
4.		

COMMENTS:

- ✓ Original will not follow
- Original will follow by: US mail
- Please call upon receipt
- Response needed by:
- For your approval/suggestions

The information contained in this facsimile message is information protected by attorney-client and/or the attorney/work product privilege. It is intended only for the use of the individual named above and the privileges are not waived by virtue of this having been sent by facsimile. If the person actually receiving this facsimile or any other reader of the facsimile is not the named recipient or the employee or agent responsible to deliver it to the named recipient, any use, dissemination, distribution or copying of the communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original message to us at the above address via U.S. Postal Service.

• IF YOU DO NOT RECEIVE ALL PAGES, PLEASE TELEPHONE US IMMEDIATELY AT 508-653-8143

CONFIDENTIALITY APPLIES IF THIS BOX IS CHECKED: ☒ |

BEST AVAILABLE COPY